



Division of Public Health Services

Office of the Assistant Director

Public Health Preparedness Services

Bureau of Emergency Medical Services

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JANET NAPOLITANO, GOVERNOR

SUSAN GERARD, DIRECTOR

PROTOCOLS, MEDICATIONS, AND DEVICES (PMD) COMMITTEE AGENDA

TELECONFERENCE MEETING ONLY

DATE: May 15, 2008

TIME: 1:00 P.M.

LOCATION: 150 N 18th Avenue, 5th Floor, Conference Room 540-A

CALL-IN INFORMATION: (602) 440-1740; Code: 6001

I. CALL TO ORDER

II. DISCUSS/AMEND and ACTION ON THE MINUTES OF February 07, 2008

III. REPORTS

- A. Chairman's Report
- B. Bureau Chief's Report

IV. DISCUSSION AND ACTION ITEMS

- A. Review and approve revised Pediatric Burn Protocol from PACES

V. CALL TO THE PUBLIC

A public body may make an open call to the public during a public meeting, subject to reasonable time, place and manner restrictions, to allow individuals to address the public body on any issue within the jurisdiction of the public body. The Committee may ask staff to review a matter or may ask that a matter be put on a future agenda. Members of the public body shall not discuss or take legal action on matters raised during an open call to the public unless the matters are properly noticed for discussion and legal action.

A.R.S. § 38-431.01(G)

VI. MEMBERS' EDUCATIONAL and INFORMATIONAL ANNOUNCEMENTS

VII. ANNOUNCEMENT OF NEXT MEETING September 19, 2008

VIII. ADJOURNMENT

MINUTES
PROTOCOLS, MEDICATIONS AND DEVICES
February 7, 2008
150 North 18th Avenue, Suite 540-A
Phoenix, Arizona

MEMBERS PRESENT:

John Gallagher (Committee Chair)
Janine Anderson
Rob Jarvis
Terry Shine
Terence Mason

By Teleconference:

Patricia Ellis
Sue Kern

MEMBERS ABSENT:

Charles Finch
Bruce Toliver
Steve Curry
Sue Kern
Rob Jarvis

ADHS Staff

Terry Mullins
Ed Armijo
Joel Bunis
Traci Alexander

I. CALL TO ORDER

The PMD meeting was called to order at 1:03 p.m. A quorum was present.

II. DISCUSS/AMEND and APPROVE MINUTES OF NOVEMBER 8, 2007

A motion was made by Janine Anderson and seconded by Terry Mason to accept the minutes of November 8, 2007. **Motion Carried.**

III. REPORTS

A. Chairman's Report

John Gallagher states nothing to report at this time.

B. Bureau Chief's Report

Terry Mullins reported that the Bureau will be working in conjunction with the University of Arizona Rural Health Office in sponsoring two training programs:

- Ambulance Service Budget Model Development;
- Rural EMS Management Awareness Training;

Training will be held at the Department of Health. Invitations to participate in the training will be sent to all providers. The Bureau will cover all transportation, food and lodging costs at state rates.

IV. DISCUSSION AND ACTION ITEMS

A. Review and approval of Pediatric Protocols submitted by PACES

Terry Mullins presented the following protocols on behalf of Dr. Woolridge for the PACES Committee:

- Heat exposure
- Shortness of breath

Dr. Woolridge has asked the PMD Committee to consider the protocols for inclusion into the statewide triage transport and protocol development process. Dr. Gallagher asked for a motion to approve these protocols and to submit them to EMS and MDC Councils. Janine Anderson accepted and Terry Mason seconded. Discussion ensued with the motion being passed as amended. Item to be placed on MDC/EMS Council agendas

B. Presentation and discussion on standardized pediatric age definitions

Dr. Zerella went over the presentation for standardizing pediatric age definitions. He “recommends that the Pediatric Advisory Committee for Emergency Services believes an age 14 limit would best serve pediatric protocols for first-responders”. Dr. Gallagher asked for a motion to accept age 14 as the upper limit for the definition of childhood. Patricia Ellis made the motion and Rob Jarvis seconded. **Motion Carried.** Item to be put on MDC/EMS Council agenda

C. Discuss adding Zofran ODT to drug box

Dr. Gallagher spoke on behalf of Dr. Gemar to add a version of Ondansetron that comes in an oral disintegrating tablet to the drug box. Janine Anderson made a motion that it be added as an optional route of administration. Joel Bunis stated that simply updating the drug profile to include the oral route of administration would be sufficient. Anderson withdrew her previous motion and instead, made a motion to add the oral disintegrating table to the drug profile as a route for administration. **Motion Carried.** **Brian Smith will update profile for placement on the next MDC agenda.**

D. Discuss developing protocol for transporting patients to cardiac resuscitation centers

Dr. Gallagher asked for a motion from the PMD Committee to agree to a protocol that will allow preferential transport of appropriate patients to a cardiac arrest center. Terry Mason made the motion and Terry Shine seconded.

Motion Carried. Item to be placed on MDC agenda

E. Use/Administration of Pralidoxime (2-PAM) and Atropine by all levels

EMT

Terry Mullins discussed allowing EMT's to self-administer Pralidoxine and Atropine in an emergency. Terry Mason felt that they should also be able to self-administer as well as administer to others. Dr. Gallagher asked for a motion that would allow all levels of EMTs to administer and self-administer 2-PAM and Atropine to themselves and patients in a perceived emergency. Terry Mason made the motion and Rob Jarvis seconded.

Motion Carried. Item to be placed on MDC agenda

F. Quick Clot

Terry Mullins stated that according to previous guidance documents, Quick Clot, which is an FDA-approved and within the scope of practice of the EMT as such does not require Departmental approval for use.

V. CALL TO THE PUBLIC

Dr. Bobrow gave a brief synopsis of how well the overall EMS situation was handled during the Super Bowl and gave kudos to the Glendale Fire Department for a job well-done.

V. SUMMARY OF CURRENT EVENTS

No current events to discuss.

VI. ANNOUNCEMENT OF NEXT MEETING – May 15, 2008

VII. ADJOURNMENT

Dr. Gallagher asked for a motion to adjourn the meeting. Patricia Ellis accepted the motion and Janine Anderson seconded. Meeting adjourned at 1:35 p.m.

Burn Injury

ABCDE Assessment

BLS

Scene Safety
Move pt to safe area

Establish adequate airway
C-spine precautions if indicated
High flow oxygen

Remove clothing
Prevent hypothermia

Cool the burn
tepid water irrigation

Cover with dry dressing

Transport to Burn Center

ALS

Follow BLS Standards

Aggressive airway
management if
airway involved

IV Fluids

•LR 20 ml/kg bolus
repeat X2 for hypotension
(SBP < 70+2X age in years)

Cardiac monitor

Consider analgesia
Morphine 0.05-0.1mg/Kg IV

Transport to Burn Center